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Fill in this information to identify your	case:	
United States Bankruptcy Court for the	ne:	
Central District of Calif	fornia	
Case number (If known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is ar amended filing

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Anna	
	Write the name that is on your	First name	First name
	government-issued picture identification (for example, your	Marie	
	driver's license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Jennings Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2	All other names you have		
2.	used in the last 8 years	First name	First name
	Include your married or maiden names and any assumed, trade names and <i>doing business as</i>	Middle name	Middle name
	names.	Last name	Last name
	Do NOT list the name of any		
	separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>0 6 4 8</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Debtor 1		Anna	Marie Jennings				Case number (if known)			
		First Name	Middle N	lame	Last Name		, ,			
			About	t Debtor 1:			About De	btor 2 (Spouse Only in a Joint Case):		
4.	4. Your Employer Identification Number (EIN), if any.		EIN -			- —	EIN			
			EIN		. — — — —	- —	EIN			
5.	Where you	live					If Debtor 2	2 lives at a different address:		
			1912 Numbe	<b>E. Mt Verno</b> er Street	on Ave		Number	Street		
				nge, CA 9286		ZIP Code	2:			
			City		State	ZIP Code	City	State ZIP Code		
			Orar County				County			
			fill it i		ess is different fron nat the court will send ddress.		it in here.	2's mailing address is different from yours, fill Note that the court will send any notices to you illing address.		
			Numbe	er Street			Number	Street		
			P.O. Bo	ЭX			P.O. Box			
			City		State	ZIP Code	City	State ZIP Code		
6.	Why you are	e choosing <i>thi</i> s e for bankruptcy	Check	k one:			Check on	e:		
		,	ha	ver the last 180 ave lived in this strict.	0 days before filing t s district longer than	this petition, I in any other	Over that the district	the last 180 days before filing this petition, I lived in this district longer than in any other at.		
				nave another re See 28 U.S.C. §	eason. Explain. § 1408)		I have	e another reason. Explain. 28 U.S.C. § 1408)		
			-							
			-							
			_							

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Debtor 1 Anna First Name		Marie	Jennings	number (if known)				
		Middle Name	Middle Name Last Name					
Par	t 2: Tell the Court About Y	our Bankruptcy (	Case					
7.	The chapter of the Bankrupto Code you are choosing to file under	Bankruptcy (Form Chapter 7 Chapter 11 Chapter 12	eck one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for hkruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
8.	How you will pay the fee	details about check, or mo a credit card  I need to pay to Pay The F  I request that judge may, b official pover choose this of	thow you may pay. Typically, oney order. If your attorney is or check with a pre-printed at the fee in installments. If your filling Fee in Installments (Officity from the fee be waived (You may but is not required to, waive your line that applies to your far	if you are paying the fee submitting your payment ddress.  ou choose this option, sig cial Form 103A).  y request this option only our fee, and may do so on mily size and you are una	the clerk's office in your local court for more yourself, you may pay with cash, cashier's on your behalf, your attorney may pay with an and attach the <i>Application for Individuals</i> if you are filing for Chapter 7. By law, a nly if your income is less than 150% of the lable to pay the fee in installments). If you papter 7 Filing Fee Waived (Official Form			
9.	Have you filed for bankruptcy within the last 8 years?	Yes. District District		WhenWhenWhenWhenWhenWhenWh/ DD /	Case number  YYYY  Case number			
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No.  ☐ Yes. Debtor  District  Debtor  District		When When When When MM / DD / YY	Relationship to you Case number, if known			
11.	Do you rent your residence?	☑ No	our landlord obtained an evict	bout an Eviction Judgmer	nt Against You (Form 101A) and file it			

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Debtor 1 Anna		Marie	Jennings		Case number (if known)				
	First Name	Middle Name	Last Name		, ,				
Par	t 3: Report About Any Bus	nesses You	Own as a Sole Proprietor						
12.	Are you a sole proprietor of	☑ No. Go	to Part 4.						
	any full- or part-time business?	Yes. Na	me and location of business						
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a	Name of	business, if any						
	corporation, partnership, or LLC	Number	Street						
	If you have more than one sole proprietorship, use a separate sheet and attach it to this								
	petition.	City		State	ZIP Code				
		Check ti	Check the appropriate box to describe your business:						
		☐ Hea	☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))						
		☐ Sing	☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))						
		☐ Stoo	☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))						
		☐ Con	☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))						
		☐ Non	e of the above						
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?	appropriate sheet, stater	deadlines. If you indicate that you	are a small busines ement, and federal	ou are a small business debtor so that it can set as debtor, you must attach your most recent balance income tax return or if any of these documents do not				
	For a definition of small busines	s 🗹 No.	I am not filing under Chapter 11.						
	debtor, see 11 U.S.C. § 101(51D).		I am filing under Chapter 11, but I Bankruptcy Code.	am NOT a small b	usiness debtor according to the definition in the				
			I am filing under Chapter 11, I am Bankruptcy Code, and I do not ch		lebtor according to the definition in the nder Subchapter V of Chapter 11.				
		☐ Yes.	I am filing under Chapter 11, I am Bankruptcy Code, and I choose to		lebtor according to the definition in the abchapter V of Chapter 11.				

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Deb	tor 1	Anna	Marie	Jennings		Case number (	(if known) <b>_</b>	
		First Name	Middle Name	Last Name			,	
Par	t 4: Repor	t if You Own or Ha	ave Any Haza	ardous Property or	Any Propert	y That Needs Immediate A	Attention	1
14.	Do you owi	n or have any	☑ No.					
	property the	at poses or is ose a threat of	☐ Yes. WI	hat is the hazard?				
	imminent a	nd identifiable						
	hazard to public health or safety? Or do you own any property that needs immediate attention?							
			lf i	mmediate attention is i	needed, why is	it needed?		
		e, do you own oods, or livestock						
	that must be	fed, or a building argent repairs?						
	and moode argoni repaire.							
		VVI	here is the property?	Number	Street			
					Number	Olleet		
					City		State	ZIP Code

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Debtor 1 Anna Marie Jennings Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Middle Name

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

First Name

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Last Name

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

ı	I am not required to receive a briefing about credit
	counseling because of:

Uncapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1		Anna	Marie	Jennings	Case number (if known)			
First Name M		Middle N	Middle Name Last Name					
Par	t 6: Answer	These Question	ns for R	eporting Purposes				
16.	What kind of have?	debts do you	16a.			er debts? Consumer debts are defit for a personal, family, or household		
			16b.			s debts? Business debts are debts ough the operation of the business		
			16c.	State the type of debts you owe	e th	at are not consumer debts or busine	ess d	ebts.
17.		g under Chapter 7?	· <b>\( \sqrt{1}\)</b>	No. I am not filing under Chap Yes. I am filing under Chapter			not pr	operty is excluded and
	exempt proper and administ paid that fund	administrative expenses are paid that funds will be available to distribute to unsecured creditors?  administrative expenses are defined by the distribution to unsecured described by the distribution de						
18.	How many crestimate that	reditors do you you owe?		1-49		25,001-50,000 50,000-	100,0	000
19.	How much d	o you estimate you worth?	ur <b>2</b> 1	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	liabilities to b		ur 🔲	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Pai	T. Sign be	TOW						
For	· you	If I have States 0 If no attraction have ob I request bankrup and 357	e chosen Code. I un orney rep stained and st relief in stand ma otcy case 71.	to file under Chapter 7, I am awanderstand the relief available understand the relief available understand the and I did not pay or and read the notice required by 11 accordance with the chapter of king a false statement, concealing	are der agi I U. title	each chapter, and I choose to proce ree to pay someone who is not an a	r Cha eed u ttorno n this	apter 7, 11,12, or 13 of title 11, United under Chapter 7.  ey to help me fill out this document, I se petition.  by fraud in connection with a
		E	xecuted	on 10/04/2024 MM/ DD/ YYYY				

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Debtor 1	Anna	Marie	Jennings	Case number (if known)
	First Name	Middle Name	Last Name	
represented	torney, if you are d by one ot represented by an ou do not need to file this	proceed under each chapter for 11 U.S.C. § 34	Chapter 7, 11, 12, or 13 of to the chapter 7, 11, 12, or 13 of the chapter 1.0 cm.	his petition, declare that I have informed the debtor(s) about eligibility to citle 11, United States Code, and have explained the relief available under le. I also certify that I have delivered to the debtor(s) the notice required by § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X /s/ Reni	amin Heston	Date 10/08/2024
			of Attorney for Debtor	MM / DD / YYYY
		Firm name	Bankruptcy	
		Costa M	lesa	CA         92626           State         ZIP Code
		Contact ph	none <u>(949) 312-1377</u>	Email address ben@nexusbk.com
		297798		CA
		Bar numbe	er	State

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		Do	cument P	age 9 of 68	
Fill in this informa	ation to identify your	case and this filing:			
Debtor 1	Anna	Marie	Jennings		
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	Central	District of	California	_
Case number					

#### Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Descril	oe Each	n Residenc	e, Building, Land, or Other Real Estate	You Own or Have ar	n Interest In	
1.	Do y	ou own or hav	e any leg	jal or equitabl	e interest in any residence, building, land, or simil	ar property?		
	<b>₫</b> N	lo. Go to Part 2	2.					
	□ Y	es. Where is the	ne propert	y?				
	1.1 Street address, if available, or other		able, or other	What is the property? Check all that apply.  ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.			
		description	,		<ul> <li>☐ Condominium or cooperative</li> <li>☐ Manufactured or mobile home</li> <li>☐ Land</li> <li>☐ Investment property</li> </ul>	Current value of the entire property?	Current value of the portion you own?	
		City	State	ZIP Code	☐ Timeshare ☐ Other Who has an interest in the property? Check one.	Describe the nature of your ownership interests (such as fee simple, tenancy by the entireties a life estate), if known.		
		County			<ul> <li>Debtor 1 only</li> <li>Debtor 2 only</li> <li>Debtor 1 and Debtor 2 only</li> <li>At least one of the debtors and another</li> </ul>	☐ Check if this is community property (see instructions)		
					Other information you wish to add about this ite property identification number:	•		
2.	you l	have attached	for Part	1. Write that n	wn for all of your entries from Part 1, including any umber here		\$0.00	
Pa	rt 2:	Descril	oe Your	Vehicles				
					nterest in any vehicles, whether they are registered rehicle, also report it on Schedule G: Executory Contra			
3.	Ca	rs, vans, trucl	ks, tracto	rs, sport utility	y vehicles, motorcycles			
	_	No						
	$\mathbf{\Lambda}$	Yes						

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	3.1	Make:	Hyundai	Who has an interest in the property? Check one.	Do not deduct secured cl	aims or exemptions. Put
			Elantra GT	☑ Debtor 1 only	the amount of any secure Creditors Who Have Clair	
		Model:	<u>Liuntiu O1</u>	<ul><li>□ Debtor 2 only</li><li>□ Debtor 1 and Debtor 2 only</li></ul>		
		Year:	2015	At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Approximate mileage:	120,000	☐ Check if this is community property (see instructions)	\$4,500.00	\$4,500.00
		Other information:				
4.	Wate	ercraft, aircraft, motor l	homes, ATVs a	nd other recreational vehicles, other vehicles, and	accessories	
	_	•	otors, personal v	vatercraft, fishing vessels, snowmobiles, motorcycle a	ccessories	
	<b>₫</b> №	10				
	□ Y	⁄es				
	4.1	Make:		Who has an interest in the property? Check one.	Do not deduct secured cl	
		Model:		<ul><li>Debtor 1 only</li><li>Debtor 2 only</li></ul>	the amount of any secure Creditors Who Have Claim	ed claims on Schedule D: ms Secured by Property.
		Year:		<ul><li>Debtor 1 and Debtor 2 only</li><li>At least one of the debtors and another</li></ul>	Current value of the entire property?	Current value of the portion you own?
		Other information:		☐ Check if this is community property (see	entile property:	portion you own:
				instructions)		
5.				vn for all of your entries from Part 2, including any umber here		\$4,500.00
	you	nave attached for Fait	2. Wille that in	uniber nere		
Do	rt 3:	Doscribo Vou	r Dorconal a	and Household Items		
Pa	III 3:	Describe You	Personal a	and nousehold items		
Do y	ou ow	n or have any legal or	equitable inter	est in any of the following items?		Current value of the portion you own?
						Do not deduct secured
_						claims or exemptions.
6.		sehold goods and furn	·	an aking kitahanwara		
		mples: Major appliances	s, furniture, liner	is, cnina, kitchenware		
	<b>✓</b> Y	es. Describe	Household g	oods and furnishings		\$1,000.00
7.	Elec	tronics				
	Exar			deo, stereo, and digital equipment; computers, printer cluding cell phones, cameras, media players, games	s, scanners; music	
		,		, , , , , , , , , , , , , , , , , , ,		
	_	es. Describe				
	<b>₹</b> 1	63. D6301D6	Electronics			\$1,500.00

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Debtor Jennings, Anna Marie

8.	Collectibles of value		
		; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or ons; other collections, memorabilia, collectibles	
	<b>☑</b> No		
	Yes. Describe		
9.	Equipment for sports and hobbid	25	
	• •	exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and	
	☐ No		
	Yes. Describe	pment for sports and hobbies	\$1,000.00
10.	Firearms		
		s, ammunition, and related equipment	
	√ No		
	Yes. Describe		
11.	Clothes		
		leather coats, designer wear, shoes, accessories	
	□ No		
	Yes. Describe	nes	\$1,000.00
12.	Jewelry		
	Examples: Everyday jewelry, cost silver	ume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,	
	☐ No		
	✓ Yes. Describe	elry	\$500.00
13.	Non-farm animals		
	Examples: Dogs, cats, birds, hors	es	
	□ No		
	Yes. Describe		unknown
14.	Any other personal and househo	old items you did not already list, including any health aids you did not list	
	<b>☑</b> No		
	Yes. Give specific information		
15.		r entries from Part 3, including any entries for pages you have attached	\$5,000.00
	io art of firme that number her	-	
Pa	rt 4: Describe Your Fin	ancial Assets	

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Debtor Jennings, Anna Marie

Do yo	ou own or have any leg	al or equitable interest in any c	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you	have in your wallet, in your home	e, in a safe deposit box, and on hand when you file your petition	
	<b>☑</b> No			
	☐ Yes		Cash:	
17.			nts; certificates of deposit; shares in credit unions, brokerage houses altiple accounts with the same institution, list each.	,
	☐ No			
	<b>√</b> Yes		Institution name:	
		17.1. Checking account:	Charles Schwab	\$16.00
		17.2. Checking account:	Found Bank	\$6.00
		17.3. Savings account:	Capital One	\$0.00
		17.4. Other financial account:	Charles Schwab	\$0.00
18.		or publicly traded stocks	erage firms, money market accounts	
	<b>√</b> No			
	Yes	Institution or issuer name:		
				_
				_
19.	Non-publicly traded st	tock and interests in incorpora	ted and unincorporated businesses, including an interest in an	
	LLC, partnership, and	joint venture		
	<b>☑</b> No			
	Yes. Give specific information about them	Name of entity:	% of ownership:	

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Debtor Jennings, Anna Marie

20.	Government and corp	orate bonds and of	ther negotiable and non-negotiable instruments	
			ecks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them.	
	<b>√</b> No			
	Yes. Give specific information about them	Issuer name:		
				-
21.	Retirement or pension	n accounts		
	-		n, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	☐ No			
	✓ Yes. List each account separately.	Type of account:	Institution name:	
	account separately.			40.00
		IRA:	Charles Schwab	\$0.00
	Examples: Agreement others		made so that you may continue service or use from a company spaid rent, public utilities (electric, gas, water), telecommunications companies, or	
	✓ No		to attention or an analysis dead.	
	☐ Yes	E	Institution name or individual:	
		Electric:		
		Gas:		
		Heating oil:		
		Security deposit or	n rental unit:	
		Prepaid rent:		-
		Telephone:		
		Water:		
		Rented furniture:		
		Other:		
23.	Annuities (A contract f	or a pariadia paymar	nt of money to you, either for life or for a number of years)	
23.	✓ No	or a periodic paymer	in of money to you, entrer for the or for a number of years)	
	☐ Yes	Issuer name and de	escription:	
	_			

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24.	Interests in an education IRA, in an acc 26 U.S.C. §§ 530(b)(1), 529A(b), and 529	count in a qualified ABLE program, or under a qualified state (b)(1).	tuition program.
	<b>☑</b> No		
	☐ Yes Institution name	and description. Separately file the records of any interests.11 U.S	.C. § 521(c):
25.	Trusts, equitable or future interests in for your benefit	property (other than anything listed in line 1), and rights or p	owers exercisable
	<b>√</b> No		
	Yes. Give specific information about them		
	momaton about them		
26.	Patents, copyrights, trademarks, trade	secrets, and other intellectual property	
	Examples: Internet domain names, webs	sites, proceeds from royalties and licensing agreements	
	<b>☑</b> No		
	Yes. Give specific information about them		
	inionnation about them		
27.	Licenses, franchises, and other genera	ıl intangibles	
	· · · · · · · · · · · · · · · · · · ·	enses, cooperative association holdings, liquor licenses, profession	onal licenses
	<b>√</b> No		
	Yes. Give specific		
	information about them		
Mone	y or property owed to you?		Current value of the
			portion you own?  Do not deduct secured
			claims or exemptions.
28.	Tax refunds owed to you		
	<b>√</b> No		
	Yes. Give specific information about them, including whether you	Fede	ral:
	already filed the returns and the tax years.	State	· · · · · · · · · · · · · · · · · · ·
	tile tax years	Loca	
			·
29.	Family support		
	Examples: Past due or lump sum alimon settlement	y, spousal support, child support, maintenance, divorce settlemer	t, property

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	,			
	<b>₫</b> No			
	Yes. Give specific information		Alimony:	
			Maintenance:	
			Support:	
			Divorce settlement:	
			Property settlement:	
30.	Other amounts someone owes you			
	Examples: Unpaid wages, disability insurance p Social Security benefits; unpaid loar	payments, disability benefits, sick pay ns you made to someone else	/, vacation pay, workers' compensation,	
	<b>☑</b> No			
	Yes. Give specific information			]
31.	Interests in insurance policies			
	Examples: Health, disability, or life insurance; he	ealth savings account (HSA); credit, h	nomeowner's, or renter's insurance	
	<b>☑</b> No			
	Yes. Name the insurance company of each policy and list its value Cor	mpany name:	Beneficiary:	Surrender or refund value:
	<del></del>			
32.	Any interest in property that is due you from	someone who has died		
	If you are the beneficiary of a living trust, expect property because someone has died.	proceeds from a life insurance policy	y, or are currently entitled to receive	
	<b>☑</b> No			
	☐ Yes. Give specific information			1
33.	Claims against third parties, whether or not y	you have filed a lawsuit or made a	demand for payment	
	Examples: Accidents, employment disputes, ins	surance claims, or rights to sue		
	<b>☑</b> No			-
	Yes. Describe each claim			
				_
34.	Other contingent and unliquidated claims of claims	every nature, including countercla	ims of the debtor and rights to set of	
	<b>₫</b> No			
	Yes. Describe each claim			]
				J
35.	Any financial assets you did not already list			
	<b>☑</b> No			_
	Yes. Give specific information			

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36.		om Part 4, including any entries for pages you have attached	\$22.00
Pa	art 5: Describe Any Business-Rel	lated Property You Own or Have an Interest In. List any re	eal estate in Part 1.
37.	Do you own or have any legal or equitable in	nterest in any business-related property?	
	☑ No. Go to Part 6.		
	Yes. Go to line 38.		
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you al	ready earned	
	<b>₫</b> No		
	Yes. Describe		-
39.	Office equipment, furnishings, and supplies		
		are, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs,	
	<b>☑</b> No		
	☐ Yes. Describe		
40.	Machinery, fixtures, equipment, supplies you	u use in business, and tools of your trade	
	<b>☑</b> No		
	Yes. Describe		
41.	Inventory		
	<b>☑</b> No		
	Yes. Describe		
42.	Interests in partnerships or joint ventures		
	<u>√</u> No		
	Yes. Describe		
	Name of entity:	% of ownership:	
	-		

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43.	Customer lists, mailing lists, or other compilations	
	☑ No	
	☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	☐ No	
	☐ Yes. Describe	
44.	Any business-related property you did not already list	
	<b>☑</b> No	
	Yes. Give specific	
	information	
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached	00.00
	for Part 5. Write that number here	\$0.00
Pa	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an <b>If you own or have an interest in farmland, list it in Part 1.</b>	Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7.	
	Yes. Go to line 47.	
		Current value of the
		portion you own?
		Do not deduct secured claims or exemptions.
47.	Farm animals	
٠,,	Examples: Livestock, poultry, farm-raised fish	
	<b>☑</b> No	
	☐ Yes	
48.	Crops—either growing or harvested	
	☑ No	
	☐ Yes. Give specific	
	information	

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Debtor Jennings, Anna Marie

49.	Farm and fishing equipment, implements, machiner	y, fixtures	s, and tools of trade		
	<b>₫</b> No				
	☐ Yes				
50.	Farm and fishing supplies, chemicals, and feed				
	<b>√</b> No				
	☐ Yes				
E1	Any form and commercial fishing related property	vou did n	et already list		
51.	Any farm- and commercial fishing-related property y  ✓ No	you did iii	ot already list		
	Yes. Give specific				
	information				
52.	Add the dollar value of all of your entries from Part for Part 6. Write that number here			•	\$0.00
Pa	rt 7: Describe All Property You Own o	r Have	an Interest in Tha	t You Did Not List Above	
53.	Do you have other property of any kind you did not	already li	st?		
	Examples: Season tickets, country club membership				
	✓ No				
	Yes. Give specific information				
54.	Add the dollar value of all of your entries from Part	7. Write th	nat number here	<b>→</b>	\$0.00
Pa	rt 8: List the Totals of Each Part of th	is Form	1		
55.	Part 1: Total real estate, line 2			→	\$0.00
56.	Part 2: Total vehicles, line 5		\$4,500.00		
57.	Part 3: Total personal and household items, line 15		\$5,000.00		
58.	Part 4: Total financial assets, line 36		\$22.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line	52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
			<b>A</b> 0 <b>T</b> 00 55	•	
62.	Total personal property. Add lines 56 through 61		\$9,522.00	Copy personal property total	+ \$9,522.00

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Debtor Jennings, Anna Marie Case number (if known)

63. Total of all property on Schedule A/B. Add line 55 + line 62. \$9,522.00

Official Form 106A/B Schedule A/B: Property page 11

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Fill in this inform	nation to identify your c	ase:		
Debtor 1	Anna	Marie	Jennings	
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Court for th	e: Central	District of	California
Case number				
(if known)				

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1: Identify the Property You Claim as Exempt					
1.	✓ You are cla ☐ You are cla	iming state and federal nor iming federal exemptions.	nbankruptcy exemptions. 1 11 U.S.C. § 522(b)(2)	1 U.S	ur spouse is filing with you.  C. § 522(b)(3)  fill in the information below.	
		on of the property and ule A/B that lists this	Current value of the portion you own  Copy the value from Schedule A/B		nount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Brief description: Line from Schedule A/B:	2015 Hyundai Elantra GT 3.1	\$4,500.00	<u> </u>	\$4,500.00  100% of fair market value, up to any applicable statutory limit  \$0.00  100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(2)  C.C.P. § 703.140(b)(5)
	Brief description: Line from Schedule A/B:	Household goods and furnishings	\$1,000.00	<b>1</b>	\$1,000.00  100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(3)
3.	(Subject to adju  ✓ No	ustment on 4/01/25 and eve		ses fi	led on or after the date of adjustment.)	

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Debtor 1

 Anna
 Marie
 Jennings
 Case number (if known) \_

 First Name
 Middle Name
 Last Name

Part 2: Add	ditional Page				
•	on of the property and ule A/B that lists this	Current value of the portion you own  Copy the value from		nount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
D : (		Schedule A/B			
Brief description:	Electronics	\$1,500.00	<b>√</b>	\$1,500.00	C.C.P. § 703.140(b)(3)
Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
Brief	Equipment for	\$1,000.00			
description:	sports and hobbies			\$1,000.00	C.C.P. § 703.140(b)(3)
Line from Schedule A/B:	9			100% of fair market value, up to any applicable statutory limit	
Brief description:	Clothes	\$1,000.00	<u> </u>	\$1,000.00	C C D S 702 440/b\/2\
Line from				100% of fair market value, up to	C.C.P. § 703.140(b)(3)
Schedule A/B:	11			any applicable statutory limit	
Brief description:	Jewelry	\$500.00	<u> </u>	\$500.00	C.C.P. § 703.140(b)(4)
Line from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	C.C.F. § 703.140(b)(4)
Brief	Charles Schwab	\$16.00		, , ,	
description:	Checking account		<b>a</b>	\$16.00	C.C.P. § 703.140(b)(5)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief	Found Bank	\$6.00			
description:	Checking account			\$6.00	C.C.P. § 703.140(b)(5)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief	Capital One	\$0.00			
description:	Savings account			\$0.00	C.C.P. § 703.140(b)(5)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief description:	Charles Schwab	\$0.00			
•	Other financial account		₹	\$0.00	C.C.P. § 703.140(b)(5)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief description:	Charles Schwab	\$0.00	<b>4</b>	\$0.00	C.C.P. § 703.140(b)(10)(E)
Line from Schedule A/B:	21			100% of fair market value, up to any applicable statutory limit	

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Fill in this inform	ation to identify your ca	ise:		
Debtor 1	Anna	Marie	Jennings	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the	e: Central	District of	
Case number (i	if			
known)				Check if this is an amended filing

#### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

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		Do	ocument P	age 23 of 68	<u> </u>	
Fill in this inform	nation to identify your c	ase:				
Debtor 1	Anno	Maria	lanninga			
Debior 1	Anna First Name	Marie Middle Name	Jennings Last Name		<del></del>	
	FIISTName	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Pontruntou Court for th	Central	District of	f California		
United States	Bankruptcy Court for th	le:		- Juniorina	_	
Case number	-					
(if known)						Check if this is an amended filing
						amended ming
Official For	<u>m 106E/F</u>					
Schadu	In F/F: Cra	editors Wh	o Have II	nsacura	d Claims	10/15
<u> Jeneuu</u>	IC L/I . CIC	Editors Wir	o nave o	113ecui e		12/15
claims that are l number the enti number (if knov	isted in <i>Schedule D:</i> ries in the boxes on th n).	Creditors Who Have C ne left. Attach the Con	Claims Secured by I tinuation Page to the	Property. If more sp	pace is needed, copy th	y creditors with partially secured ne Part you need, fill it out, ges, write your name and case
Part 1:	List All of Your PRI	ORITY Unsecured	Claims			
3. Do any cro	List All of Your NO	NPRIORITY Unsecuity unsecuity unsecured claims at the trip to the trip that the trip trip trip trip trip trip trip trip	against you?	ith vour other sched	dules.	
<b>✓</b> Yes	<b>.</b>	·		·		
nonpriority included in	unsecured claim, list th	ne creditor separately fone creditor holds a partion	r each claim. For ea	ch claim listed, iden	tify what type of claim it	reditor has more than one is. Do not list claims already in three nonpriority unsecured
						Total claim
4.1 BARCI	AVO DANIK DEL AM	4DE	1 4 4 -1114-	<i>.</i>	5 4 0 0	<b>*</b> 4.404.00
BARCE	AYS BANK DELAW	AKE	Last 4 digits o	f account number	5 4 2 2	\$1,484.00
•	y Creditor's Name		When was the	debt incurred?	2024	
PO BOX	( 8803					-
Number	Street					
				•	is: Check all that apply.	
WILMIN	GTON, DE 19899-8	803	Contingent			
City	State	ZIP Cod	💳 🔲 Unliquidate	d		
•			☐ Disputed			
	rred the debt? Check	one.	Type of NONE	RIORITY unsecure	od claim:	
☑ Debto	•		Student loa			
Debto					paration agreement of 45	vorce that you did not report or
	r 1 and Debtor 2 only		priority clai		aradon agreement of div	vorce that you did not report as
☐ At leas	st one of the debtors ar	nd another			ing plans, and other simi	lar debts
☐ Checl	c if this claim is for a	community debt		cify Credit Card	5 ; ;	
le the ele	im subject to offset?		_ 5	, <u>J. Gair Gaira</u>		_
✓ No	iiii aubject to onset?					

Yes

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Debtor 1 Jennings Anna Marie \_ Case number (if known) \_\_ First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	· Continuation Page					
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim					
4.2	CHASE CARD SERVICES	Last 4 digits of account number 3 1 5 1 \$1,987.00					
	Nonpriority Creditor's Name	<u> </u>					
	PO BOX 15369	When was the debt incurred? 11/27/2017					
	Number Street	•					
		As of the date you file, the claim is: Check all that apply.					
	WILMINGTON, DE 19850-5369	□ Contingent □ Unliquidated					
	City State ZIP Code						
		☐ Disputed					
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:					
	☑ Debtor 1 only	☐ Student loans					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>					
	At least one of the debtors and another						
	☐ Check if this claim is for a community debt						
	_	☑ Other. Specify Credit Card					
	Is the claim subject to offset?						
	☑ No						
	Yes						
4.3	CHASE CARD SERVICES	Last 4 digits of account number 8 7 4 4 \$7,431.00					
	Nonpriority Creditor's Name						
	PO BOX 15369	When was the debt incurred? 8/9/2019					
	Number Street						
		As of the date you file, the claim is: Check all that apply.					
	WILMINGTON, DE 19850-5369	☐ Contingent					
	City State ZIP Code	- Unliquidated					
		☐ Disputed					
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:					
	☑ Debtor 1 only ☐ Debtor 2 only	☐ Student loans					
	Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as					
	At least one of the debtors and another	priority claims					
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify Credit Card					
	·	☑ Other. Specify Credit Card					
	Is the claim subject to offset?						
	☑ No						
	☐ Yes						

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Debtor 1

Anna Marie Jennings Case number (if known) \_
First Name Middle Name Last Name

Part :	Your NONPRIORITY Unsecured Claims —	Continuation Page					
After lis	ting any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so fo	rth.				Total claim
4.4 C NC N	HASE CARD SERVICES Impriority Creditor's Name O BOX 15369 Imber Street VILMINGTON, DE 19850-5369	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured Student loans Obligations arising out of a separ priority claims Debts to pension or profit-sharing Other. Specify Credit Card	9 s: Che claim	9/10/	that ap	oply.  or divorce that you did n	\$1,355.00
4.5 C	HASE CARD SERVICES enpriority Creditor's Name O BOX 15369 ember Street	Last 4 digits of account number       8       7       5       1       \$2,305.00         When was the debt incurred?       7/5/2019					
Ciff Windows  State  Is	VILMINGTON, DE 19850-5369  by State ZIP Code  no incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  the claim subject to offset?  No  Yes	As of the date you file, the claim is  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured Student loans Obligations arising out of a separ priority claims Debts to pension or profit-sharing Other. Specify Credit Card	claim	ı: agreei	ment c	or divorce that you did n	oot report as

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Debtor 1 Anna Marie Jennings

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Case number (if known) \_ First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim **CHASE CARD SERVICES** Last 4 digits of account number \$6,906.00 4 1 9 9 Nonpriority Creditor's Name When was the debt incurred? 1/25/2023 PO BOX 15369 Number As of the date you file, the claim is: Check all that apply. Contingent **WILMINGTON, DE 19850-5369** ■ Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Is the claim subject to offset? **☑** No ☐ Yes 4.7 CITIBANK Last 4 digits of account number 8 9 9 \$4,693.00 Nonpriority Creditor's Name When was the debt incurred? 1/8/2018 **5800 S CORPORATE PL** Number Street As of the date you file, the claim is: Check all that apply. Contingent SIOUX FALLS, SD 57108-5027 Unliquidated ZIP Code City State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims

Debts to pension or profit-sharing plans, and other similar debts

✓ Other. Specify Credit Card

■ At least one of the debtors and another

Is the claim subject to offset?

✓ No ☐ Yes

☐ Check if this claim is for a community debt

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Jennings Case number (if known)

First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim **CITIBANK** Last 4 digits of account number 6 0 5 1 \$3,411.00 Nonpriority Creditor's Name When was the debt incurred? 7/12/2023 **5800 S CORPORATE PL** As of the date you file, the claim is: Check all that apply. Contingent SIOUX FALLS, SD 57108-5027 ■ Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Is the claim subject to offset? **☑** No ☐ Yes 4.9 CITIBANK / BEST BUY Last 4 digits of account number 8 3 7 \$4,535.00 Nonpriority Creditor's Name When was the debt incurred? 4/25/2019 PO BOX 6497 Number Street As of the date you file, the claim is: Check all that apply. Contingent **SIOUX FALLS, SD 57117-6497** Unliquidated ZIP Code City State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Credit card

Is the claim subject to offset?

✓ No ☐ Yes Case 8:24-bk-12561 Doc 1 Filed 10/08/24 Entered 10/08/24 23:21:11 Desc Main Document Page 28 of 68

Last Name

Case number (if known) \_\_\_\_

Debtor 1 Anna Marie Jennings

Middle Name

First Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims -	- Continuation Page						
After	listing any entries on this page, number them beginnin	g with 4.4, followed by 4.5, and so forth.	Total claim					
4.10	CRUNCH	Last 4 digits of account number 2 3 9 3						
	Nonpriority Creditor's Name	When was the debt incurred?						
	502 E 1ST ST							
	Number Street  TUSTIN, CA 92780-3347  City State ZIP Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No □ Yes	As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did no priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Unsecured	t report as					
4.11	DISCOVER BANK Nonpriority Creditor's Name	Last 4 digits of account number       6       6       5       8         When was the debt incurred?       1/11/2013	\$11,055.00					
	PO BOX 30939 Number Street	As of the date you file, the claim is: Check all that apply.						
	SALT LAKE CITY, UT 84130	☐ Contingent ☐ Unliquidated						
	City State ZIP Code	☐ Disputed	\$11,055.00					
	Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  □ Yes	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card						

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Debtor 1 Anna Marie Jennings

☐ Check if this claim is for a community debt

Is the claim subject to offset?

✓ No ☐ Yes Page 29 of 68

Anna Jennings Marie Case number (if known) \_ First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim **GOLDMAN SACHS / APPLE CARD** Last 4 digits of account number 5 0 0 3 \$1,374.00 Nonpriority Creditor's Name When was the debt incurred? 11/20/2022 LOCKBOX 6112 PO BOX 7247 As of the date you file, the claim is: Check all that apply. Number Street Contingent PHILADELPHIA, PA 19170-0001 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ☐ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Credit Card Is the claim subject to offset? **✓** No ☐ Yes 4.13 **MOHELA / DEPT OF EDUCATION** Last 4 digits of account number \$47,815.00 Nonpriority Creditor's Name When was the debt incurred? 2012 - 2017 **633 SPIRIT DR** Number Street As of the date you file, the claim is: Check all that apply. Contingent CHESTERFIELD, MO 63005-1243 Unliquidated City State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ✓ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as Debtor 1 and Debtor 2 only ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

Other. Specify

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Last Name

Case number (if known) \_

Debtor 1 Anna Marie Jennings

Middle Name

First Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim **SYNCHRONY / PAYPAL CREDIT** Last 4 digits of account number \$4,096.00 0 6 4 5 Nonpriority Creditor's Name When was the debt incurred? 10/23/2012 PO BOX 965005 Number As of the date you file, the claim is: Check all that apply. Contingent ORLANDO, FL 32896 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Is the claim subject to offset? **☑** No ☐ Yes 4.15 WELLS FARGO CARD SERVICES Last 4 digits of account number 2 0 6 \$3,281.00 Nonpriority Creditor's Name When was the debt incurred? 6/8/2011 PO BOX 51193 Number Street As of the date you file, the claim is: Check all that apply. Contingent LOS ANGELES, CA 90051-5493 Unliquidated ZIP Code City State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ✓ Other. Specify Credit Card Is the claim subject to offset? **✓** No ☐ Yes

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Debtor 1

 Anna
 Marie
 Jennings
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 4:	Add t	he Amounts for Each Type of Unsecured Claim					
		ts of certain types of unsecured claims. This information is s for each type of unsecured claim.	for sta	atisti	ical reporting purposes onl	ly. 28 U.S.C. § 159.	
					Total claim		
Total claims from Part 1	6a.	Domestic support obligations	6a.		\$0.00		
	6b.	Taxes and certain other debts you owe the government	6b.		\$0.00		
	6c.	Claims for death or personal injury while you were intoxicated	6c.		\$0.00		
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00		
	6e.	<b>Total.</b> Add lines 6a through 6d.	6e.		\$0.00		
					Total claim		
Total claims from Part 2	6f.	Student loans	6f.		\$47,815.00		
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00		
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00		
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$54,042.00		
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.		\$101,857.00		

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Fill in this information	n to identify your case	:		
Debtor 1	Anna	Marie	Jennings	
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Bank	cruptcy Court for the:	Cer	ntral District of Ca	alifornia
Case number (if known)				

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with who	om you ha	ve the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	

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	23C 0.24 BK	12301 13001	Document P	age 33 of 6	38 <u> </u>		CSC MAIN
Fill in this info	ormation to identify	your case:					
Debtor 1	Anna	Marie	Jennings				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if fili	ng) First Name	Middle Name	Last Name				
United State	es Bankruptcy Cour	t for the: Centr	District of	of California	<u>a</u>		
Case number (if known)	er						Check if this is an amended filing
Official Fo	orm 106H						
Sched	ule H: Yo	our Codebto	rs				12/15
1. Do you  1. Ve:  2. Within Califor	wer every question u have any codebt s the last 8 years, h nia, Idaho, Louisian to Go to line 3.	ors? (If you are filing a join nave you lived in a comm na, Nevada, New Mexico, P	nt case, do not list eithe unity property state o uerto Rico, Texas, Was	r spouse as a cod or territory? (Com shington, and Wise	debtor.) nmunity property state	·	<u> </u>
	s. Dia your spouse, No	former spouse, or legal eq	uivaient live with you a	tne time?			
		munity state or territory did	you live?		Fill in the name and	d current addre	ss of that person.
	Name of your spo	use, former spouse, or lega	al equivalent	_			
	Number	Street					
	City	State	ZIP Co	de			
2 agai	n as a codebtor or	our codebtors. Do not inc ally if that person is a gua orm 106E/F), or <i>Schedule</i>	rantor or cosigner. Ma	ake sure you hav	ve listed the creditor	on Schedule L	D (Official Form 106D),
Colum	n 1: Your codebtor				Column 2: The credit	or to whom yo	ou owe the debt
					Check all schedules th	hat apply:	

	Schedule E/F (Official Forf	ii 100E/F), or Schedule & (Official Fortil 100G).	ile D, Schedule E/F, or Schedule G to fill out Coldinit 2.			
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt		
				Check all schedules that apply:		
3.1						
	Name			☐ Schedule D, line		
	<del></del>			☐ Schedule E/F, line		
	Number	Street		☐ Schedule G, line		
	City	State	ZIP Code			
3.2						
	Name			☐ Schedule D, line		
				☐ Schedule E/F, line		
	Number	Street		☐ Schedule G, line		
	1					
	City	State	ZIP Code			

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			Docur	ment P	age	e 34 of 6	8			
Fil	in this information to	identify your ca	se:							
D	ebtor 1	Anna	Marie Jen	nings						
	-	First Name		Name						
	ebtor 2							Chapte if this is:		
(3	Spouse, if filing)	First Name		Name				Check if this is:  An amended filing	α	
U	nited States Bankrup	tcy Court for the	Central Dis	strict of Calif	forn	<u>ia</u>		A supplement sho	•	petition
_	ase number							chapter 13 incom	e as of the	following date
								MM / DD / YYYY		
Οf	ficial Form 1	1061								
			como							4045
	chedule I:		e. If two married people are							12/15
Pa	rt 1: Describe Er	mployment	ase number (if known). Ans	swer every que	estio	n.				
1.	Fill in your employinformation.	ment		Debtor 1				Debtor 2 or no	n-filing sp	ouse
	If you have more the		Employment status	<b>☑</b> Employed		lot Employe	d	☐ Employed ☐ No	ot Employe	ed
	attach a separate painformation about a	•	Occupation	Cashier						
	employers.  Include part time, se	oasanal or	Employer's name	Total Wine	& M	ore				
	self-employed work		Employer's address							
	Occupation may inc	clude student	Employer 3 address	Number Stree		<u>IVa</u>		Number Street		
	or homemaker, if it	applies.								
				Huntingtn B	Bch.	CA 92647	-3702			
				City		State	Zip Code	City	State	Zip Code
			How long employed there?	2 months					_	
Pa	ort 2: Give Detail	s About Mont	hly Income							
	Estimate monthly in		date you file this form. If yo	ou have nothin	ig to	report for an	y line, write \$	60 in the space. Include y	your non-fi	ling spouse
	If you or your non-fi	ling spouse have	e more than one employer, c	ombine the inf	forma	ation for all e	mployers for	that person on the lines	below. If y	ou need
	more space, attach	a separate snee	et to this form.			For	Debtor 1	For Debtor 2 or		
								non-filing spouse		
2.			and commissions (before all culate what the monthly wag		2.	\$2	,558.23	\$0.00		
3.	Estimate and list m	onthly overtime	рау.		3.	+	\$0.00	+ \$0.00		

4. Calculate gross income. Add line 2 + line 3.

\$2,558.23

\$0.00

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				Document	Page 35	o 01 68		
Deb	tor 1	Anna	Marie	Jennings		Cas	e number (if known)	
		First Name	Middle Name	Last Name				
						For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line	4 here		→	4.	\$2,558.23	\$0.00	
5.		yroll deductions:						
	5a. <b>Tax, N</b>	Medicare, and Soci	al Security deductions		5a.	\$160.76	\$0.00	
	5b. <b>Mand</b>	atory contribution	s for retirement plans		5b.	\$79.95	\$0.00	
	5c. Volun	tary contributions	for retirement plans		5c.	\$0.00	\$0.00	
	5d. <b>Requ</b> i	ired repayments of	retirement fund loans		5d.	\$0.00	\$0.00	
	5e. <b>Insur</b> a	ance			5e.	\$16.41	\$0.00	
	5f. Dome	stic support oblig	ations		5f.	\$0.00	\$0.00	
	5g. <b>Unio</b> n	dues			5g.	\$0.00	\$0.00	
	5h. Other	deductions. Speci	ify:		5h	÷\$0.00	+ \$0.00	
6.	Add the p	ayroll deductions.	. Add lines 5a + 5b + 5c + 5	id + 5e +5f + 5g + 5h.	6.	\$257.12	\$0.00	
7.	Calculate	total monthly take	e-home pay. Subtract line	e 6 from line 4.	7.	\$2,301.11	\$0.00	
8.	List all ot	her income regula	rly received:					
	profes	ssion, or farm	property and from oper					
			ach property and busines cessary business exper	0 0				
		nly net income.	cessary business exper	ises, and the total	8a.	\$0.00	\$0.00	
	8b. Intere	st and dividends			8b.	\$0.00	\$0.00	
		y support paymen ndent regularly rec	ts that you, a non-filing eive	spouse, or a				
		e alimony, spousal ment, and property	support, child support, r settlement.	maintenance, divorce	8c.	\$0.00	\$0.00	
	8d. Unem	ployment compen	sation		8d.	\$0.00	<u>\$0.00</u>	
	8e. Socia	I Security			8e.	\$0.00	\$0.00	
		_	stance that you regularly					
	assist	ance that you rece	and the value (if known) ive, such as food stamps ssistance Program) or h	s (benefits under the				
	Speci	fy:			_ 8f.	\$0.00	\$0.00	
	8g. <b>Pensi</b>	on or retirement in	come		8g.	\$0.00	\$0.00	
	8h. Other	monthly income.	Specify:		_ 8h	\$0.00	+ \$0.00	
9.	Add all of	ther income. Add li	nes 8a + 8b + 8c + 8d +	8e + 8f +8g + 8h.	9.	\$0.00	\$0.00	
10.		monthly income. In tries in line 10 for	Add line 7 + line 9. Debtor 1 and Debtor 2 o	or non-filing spouse	10.	\$2,301.11	+ \$0.00	= \$2,301.11
11.	State all o	other regular contr	ibutions to the expense	s that you list in Scl	nedule J.			
	friends or	relatives.	n unmarried partner, mei already included in lines	-				
	Specify: _							+ \$0.00
12.			column of line 10 to the					***********
	amount o	n the Summary of	Your Assets and Liabiliti	es and Certain Statis	ticai Informat	on, it it applies	12.	\$2,301.11
13.	Do vou e	kpect an increase	or decrease within the y	rear after vou file this	s form?			Combined monthly income

**√**No.

Yes. Explain:

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Debtor 1 Anna Marie Jennings Case number (if known) First Name Middle Name Last Name 1. Employment information for Debtor 1 Occupation Vote center supervisor Employer's name **County of Orange Employer's address** 1770 N Broadway Number Street State Zip Code How long employed there? 1 month

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Debtor 1 Anna Marie **Jennings** Case number (if known) -First Name Middle Name Last Name 8a. Attached Statement **InstaCart** FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: 1. Gross Monthly Income: \$0.00 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts \$0.00 TOTAL PAYMENTS TO SECURED CREDITORS Other Expenses TOTAL OTHER EXPENSES \$0.00 \$0.00 4. TOTAL MONTHLY EXPENSES(Add item 2 - 21) PART C - ESTIMATED AVERAGE NET MONTHLY INCOME: 5. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) \$0.00

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			Document	Page 38 of 68	_	
Fill in this information	on to identify your cas	e:				
Debtor 1  Debtor 2	Anna First Name	Marie Middle Name	Jennings Last Name		Check if this is:  An amended filing	
(Spouse, if filing)	First Name kruptcy Court for the:	Middle Name Cel	Last Name	alifornia	A supplement showing postpetition chapter 13 expenses as of the following date:  MM / DD / YYYY	
Official Form	<u>n 106J</u> J: Your Ex	penses			1 12/15	i
Be as complete and	accurate as possible	. If two married pe	ople are filing toge	ther, both are equally	responsible for supplying correct information. If more	

space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household				
1. Is this a joint case?				
No. Go to line 2.  Yes. Does Debtor 2 live in a separate house  No  Yes. Debtor 2 must file Official Form		Separate Household of Debtor 2.		
	Fill out this information ch dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?  No. Yes.  No. Yes.  No. Yes.  No. Yes.  No. Yes.  No. Yes.
3. Do your expenses include expenses of people other than yourself and your dependents? ✓ No  Yes				
Part 2: Estimate Your Ongoing Monthly E	xpenses			
Estimate your expenses as of your bankruptcy fill date after the bankruptcy is filed. If this is a supple				
Include expenses paid for with non-cash governmesuch assistance and have included it on Schedule			Yo	our expenses
<ol> <li>The rental or home ownership expenses for your for the ground or lot.</li> </ol>	our residence. Include f	irst mortgage payments and any rent	4	\$1,334.00
If not included in line 4:				
4a. Real estate taxes			4a	\$0.00
4b. Property, homeowner's, or renter's insuran	ce		4b	\$0.00
4c. Home maintenance, repair, and upkeep ex	penses		4c	\$0.00
4d. Homeowner's association or condominium	dues		4d	<b>\$0.00</b>

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Debtor 1 Anna Marie Jennings Case number (if known)

Last Name

First Name

Middle Name

First Name Middle Name Last Name		/a a.v.a.u
	Y	our expenses
5. Additional mortgage payments for your residence, such as home equity loans	5	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a	\$150.00
6b. Water, sewer, garbage collection	6b	\$100.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$100.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7.	\$400.00
3. Childcare and children's education costs	8	\$0.00
e. Clothing, laundry, and dry cleaning	9	\$0.00
10. Personal care products and services	10.	\$100.00
11. Medical and dental expenses	11	\$100.00
<ol><li>Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.</li></ol>	12.	\$200.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$50.00
4. Charitable contributions and religious donations	14.	\$0.00
15. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance	150	\$0.00
		40.00
15b. Health insurance		\$0.00 \$0.00
15c. Vehicle insurance	15c	
15d. Other insurance. Specify:	15d	\$0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:		\$0.00
8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18. <u> </u>	\$0.00
19. Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Deb	Pebtor 1 Anna		Marie	Marie Jennings		
		First Name	Middle Name	Last Name		
21.	Other. Spe	ecify: See Addit	ional Page	_	21. +	\$206.00
22.	Calculate y	your monthly exp	penses.			
	22a. Add li	ines 4 through 21			22a	\$2,740.00
	22b. Copy	line 22 (monthly	expenses for Debtor 2),	if any, from Official Form 106J-2	22b.	\$0.00
	22c. Add li	ne 22a and 22b.	The result is your month	ly expenses.	22c	\$2,740.00
23.	Calculate y	your monthly net	income.			
	23а. Сору	line 12 (your com	bined monthly income)	from Schedule I.	23a. <u> </u>	\$2,301.11
	23b. Copy	your monthly exp	enses from line 22c abo	ve.	23b. <b>_</b>	\$2,740.00
	23c. Subtra	act your monthly	expenses from your mor	nthly income.		
	The r	esult is your <i>mon</i>	thly net income.		23c	(\$438.89)
24.	Do you ex	pect an increase	or decrease in your exp	penses within the year after you fil	le this form?	
				car loan within the year or do you e of a modification to the terms of you		
	<b>√</b> No.	None				
	Yes.					

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Debtor 1 Anna		Marie	Jennings	Case number (if known)
	First Name	Middle Name	Last Name	·
				Amount
21. Other				
Pet exper	nses			\$150.00
Business	insurance			\$56.00

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Fill in this information	to identify your case:			
Debtor 1	Anna	Marie	Jennings	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankı	ruptcy Court for the:	Cer	ntral District of Cal	fornia
Case number				
(if known)				

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your origin new <i>Summary</i> and check the box at the top of this page.	al forms, you must fill out a
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	40.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$9,522.00
1c. Copy line 63, Total of all property on Schedule A/B	\$9,522.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$101,857.00
Your total liabilities	\$101,857.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$2,301.11
5. Schedule J: Your Expenses (Official Form 106J)	<b>An m</b> 40 55
Copy your monthly expenses from line 22c of Schedule J	\$2,740.00

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Debtor 1 Anna Marie Jennings Case number (if known) — Last Name

Part 4: Answer These Questions for Administrative and Statistical Records		
6. Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the ✓ Yes	ne court with your other sched	lules.
<ul> <li>7. What kind of debt do you have?</li> <li>✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individua family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28</li> <li>✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the for this form to the court with your other schedules.</li> </ul>	U.S.C. § 159.	:
8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	n Official	\$469.08
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$0.00	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
9d. Student loans. (Copy line 6f.)	\$47,815.00	
9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00	
9g. <b>Total</b> . Add lines 9a through 9f.	\$47,815.00	

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Fill in this information	to identify your case	:	
Debtor 1	Anna	Marie	Jennings
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankr	ruptcy Court for the:	Cer	ntral District of California
Case number			
(if known)			

### Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you now or agree to new company who is NOT an atte	prove to halp you fill out hankruptov formo?
Did you pay or agree to pay someone who is NOT an atto	nney to neip you iiii out banki uptcy tornis?
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the su	mmary and schedules filed with this declaration and that they are true and correct.
x Ala	
Anna Marie Jennings, Debtor 1	
Date 10/04/2024	
MM/ DD/ YYYY	

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Fill in this information	to identify your case	:		
Debtor 1	_Anna	Marie	Jennings	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankı	ruptcy Court for the:	Cer	ntral District of Califo	rnia
Case number				
(II KIIOWII)				

## Official Form 107

## Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

re other than where you li	ive now?		
no other than mioro you			
3 years. Do not include w	here you live now		
Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
	☐ Same as Debtor 1		☐ Same as Debtor 1
_ From 10/2021			_ From
To <b>8/2024</b>	Number Street		To
_			_
_	City	State ZIP Code	-
	Same as Debtor 1		Same as Debtor 1
From <b>12/2019</b>			_ From
To <u>10/2021</u>	Number Street		То
_			-
_	City	State ZIP Code	_
	Dates Debtor 1 lived there  From 10/2021 To 8/2024  From 12/2019	Dates Debtor 1 lived there  Debtor 2:  Same as Debtor 1  From 10/2021  To 8/2024  Number Street  City  Same as Debtor 1  Number Street  Number Street	Dates Debtor 1 lived there  Debtor 2:  Same as Debtor 1  From 10/2021  To 8/2024  Number Street  City State ZIP Code  Same as Debtor 1  From 12/2019  To 10/2021  Number Street

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Anna Marie Jennings Case number (if known)

ebtor 1	Anna Ma	arie Jenni	ings		Case number (if kno	wn)
	First Name Mic	ddle Name Last Na	ame			,
Part 2: Ex	xplain the Sources of Y	our Income				
Fill in the to	have any income from emp tal amount of income you re ling a joint case and you ha	eceived from all jobs and a	II businesses, includin	ng part-time a	ctivities.	years?
─ ✓ Yes. F	Fill in the details.					
		Debtor 1			Debtor 2	
		Sources of income	e Gross Incon	ne	Sources of income	Gross Income
		Check all that appl	y. (before deduexclusions)	uctions and	Check all that apply.	(before deductions and exclusions)
	nuary 1 of current year unti filed for bankruptcy:	Wages, commis bonuses, tips	sions, <b>\$7</b> .	,360.00	☐ Wages, commissions, bonuses, tips	
	. ,	☑ Operating a busi	ness \$1	,284.00	Operating a business	
	calendar year: 1 to December 31, 2023	Wages, commis bonuses, tips	sions,	250.00	☐ Wages, commissions, bonuses, tips	
(dandary	YYYY	_/ Operating a busi	ness <b>\$5</b>	,950.00	Operating a business	
	alendar year before that:  1 to December 31, 2022	Wages, commis bonuses, tips	sions, \$40	,522.00	☐ Wages, commissions, bonuses, tips	
(January	YYYY	Operating a busi	ness \$6	,646.00	Operating a business	
Include inco public bene filing a joint		hat income is taxable. Exa al income; interest; divider	mples of other income nds; money collected	e are alimony from lawsuits		urity, unemployment, and other nd lottery winnings. If you are
		Sources of income	e Gross incon	ne from	Sources of income	Gross Income from
		Describe below.	each source (before dedu exclusions)	•	Describe below.	each source (before deductions and exclusions)
	nuary 1 of current year unti filed for bankruptcy:	the				
For last c	alendar year:					
(January	1 to December 31, <u>2023</u>				_	•

For the calendar year before that:

(January 1 to December 31, 2022 )

\$1,800.00

Unemployment

income

Document Page 47 of 68 Debtor 1 Anna Marie **Jennings** Case number (if known) \_ First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more? No. Go to line 7. ☐ Yes. List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ✓ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment ■ Mortgage Creditor's Name ☐ Car ☐ Credit card Number Street Loan repayment ☐ Suppliers or vendors Other — ZIP Code City State 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment Insider's Name Number Street City State ZIP Code

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Debtor 1 Anna Marie **Jennings** Case number (if known) \_ First Name Middle Name Last Name 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. **√**No Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Street Number City State ZIP Code Identify Legal Actions, Repossessions, and Foreclosures Part 4: 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. **✓** No Yes. Fill in the details. Nature of the case Court or agency Status of the case Pending Case title \_\_\_ On appeal Court Name ☐ Concluded Number Street Case number \_\_\_\_\_ City State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.

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First Name  Gifts with a total value of per person  Person to Whom You Gave the Number Street  City  Person's relationship to your street of No  Within 2 years before your street of No  Yes. Fill in the details for that total more than \$60	State ZIP Code ou	Describe the gifts	Dates you gave the gifts  the a total value of more than \$6	
Person to Whom You Gave the Number Street  City  Person's relationship to you should be seen to you should be	State ZIP Code ou	tcy, did you give any gifts or contributions wit	the gifts	
Number Street  City  Person's relationship to you  4. Within 2 years before you  No  Yes. Fill in the details for the contributions to	State ZIP Code ou ou filed for bankrupt		th a total value of more than \$6	600 to any charity?
Number Street  City  Person's relationship to you  4. Within 2 years before you  No  Yes. Fill in the details for the difference of the di	State ZIP Code ou ou filed for bankrupt		th a total value of more than \$6	500 to any charity?
City  Person's relationship to you  4. Within 2 years before you  No  Yes. Fill in the details for the diffusion of the diffu	ouou filed for bankrupt		th a total value of more than \$6	600 to any charity?
City  Person's relationship to your selectionship to your selectio	ouou filed for bankrupt		th a total value of more than \$6	600 to any charity?
City  Person's relationship to you  4. Within 2 years before you  No  Yes. Fill in the details for the diffusion of the diffu	ouou filed for bankrupt		th a total value of more than \$6	500 to any charity?
Person's relationship to you  4. Within 2 years before you  No  Yes. Fill in the details for the contributions to	ouou filed for bankrupt		th a total value of more than \$6	600 to any charity?
Person's relationship to your person's relationship to your person in the details for the deta	ouou filed for bankrupt		th a total value of more than \$6	600 to any charity?
I. Within 2 years before you do not not not not not not not not not no	ou filed for bankrupt		th a total value of more than \$6	500 to any charity?
4. Within 2 years before your of No  ☐ Yes. Fill in the details for contributions to	ou filed for bankrupt		th a total value of more than \$6	600 to any charity?
		cribe what you contributed	Date you contributed	Value
Charity's Name				
Number Street				
City State	ZIP Code			
•				
art 6: List Certain Los	sses			
5. Within 1 year before yo ambling?	u filed for bankruptc	ey or since you filed for bankruptcy, did you lo	ose anything because of theft,	fire, other disaster, or
<b>☑</b> No				
Yes. Fill in the details.				
Describe the property y	ou lost and Descri	be any insurance coverage for the loss	Date of your loss	Value of property lost
how the loss occurred		e the amount that insurance has paid. List pend		
	insurar	nce claims on line 33 of Schedule A/B: Property	/.	

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btor 1	Anna	Marie		Jennings	Case number (if kno	own)
	First Name	Middle	Name	Last Name		
art 9: Id	lentify Property	You Hold o	or Control f	or Someone Else		
3 Do you	hold or control an	v property th	at someone	alsa owns? Includa any n	roperty you borrowed from, are storing for	or hold in trust for some
_	noid of control an	ly property th	iat someone	eise owiis: iliciade ally p	roperty you borrowed from, are storing for	, or more in trust for some
<b>√</b> No						
Yes. F	Fill in the details.					
			Where is t	he property?	Describe the property	Value
Owner's N	lame				_	
			Number 5	Street		
 Number	Street				_	
Number	Street				_	
			City	State ZIP Code		
City	State	ZIP Code				
pollutai <b>port all r</b> . <b>Has an</b> . No	nt, contaminant, or notices, releases, a	similar term. and proceedi	ngs that you	know about, regardless o	lous waste, hazardous substance, toxic sub  f when they occurred.  liable under or in violation of an environm	
			Governmen	ntal unit	Environmental law, if you know it	Date of notice
Name of s	site		Governmental	l unit		
Number	Street		Number St	treet		
			City	State ZIP Code		
City	State	ZIP Code				
: Have v	ou notified any go	vornmontal u	nit of any role	oseo of hazardous matoric	512	
_	ou nouneu any gov	verrindindi u	ini oi any rei	ease of hazardous materia	ai :	
<b>√</b> No						
☐ Yes. F	Fill in the details.					
	107		<b>-</b>		dividuals Filing for Bankruntey	ns

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First Name   Middle Name   Last Name
Name of site  Governmental unit  Number Street  City State ZIP Code  Court or agency Nature of the case Status of the case  Case title  Court Name    Number Street   Pending On appeal Occurred Concluded Concl
Number Street  City State ZIP Code  State ZIP Code  City State ZIP Code  State ZIP Code  City State ZIP Code  City State ZIP Code  City State ZIP Code  Court or agency Include settlements and orders.  Court or agency Nature of the case Status of the case  Case title  Court Name  Pending On appeal On appeal Concluded  City State ZIP Code  City State ZIP Code  City State ZIP Code  City State ZIP Code  Court Name  Aumber of the case Status of the ca
Number Street  City State ZIP Code  Court or agency Nature of the case Status of the case  Case title Court Name Pending On appeal Concluded  Number Street  City State ZIP Code  Case number  City State ZIP Code  Case number City State ZIP Code  Case number City State ZIP Code  Case number City State ZIP Code  Case number City State ZIP Code  Case number City State ZIP Code
City State ZIP Code  Court or agency Nature of the case Status of the case  Court Name Pending On appeal On appeal Concluded  Court Name City State ZIP Code  Case number  City State ZIP Code  Case number City State ZIP Code  Case number City State ZIP Code  Case number City State ZIP Code  Case number City State ZIP Code  Case number City State ZIP Code
Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No  Yes. Fill in the details.  Court or agency Nature of the case Status of the case  Case title  Court Name  Number Street  City State ZIP Code  This Give Details About Your Business or Connections to Any Business  Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)
A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time    A member of a limited liability company (LLC) or limited liability partnership (LLP)    A member of a limited liability company (LLC) or limited liability partnership (LLP)
☑ No  ☐ Yes. Fill in the details.  ☐ Court or agency ☐ Nature of the case ☐ Court Name ☐ On appeal ☐ Concluded ☐ Case number ☐ City State ZIP Code ☐ Concluded ☐ Concluded ☐ Case number ☐ City State ZIP Code ☐ Concluded ☐
☑ No  ☐ Yes. Fill in the details.  ☐ Court or agency ☐ Nature of the case ☐ Court Name ☐ On appeal ☐ Concluded ☐ Case number ☐ City State ZIP Code ☐ Concluded ☐ Concluded ☐ Case number ☐ City State ZIP Code ☐ Concluded ☐
Case title
Case title Court or agency
Case title Court Name Pending On appeal Concluded Concluded Concluded Concluded
Case number  City State ZIP Code  Tt 11: Give Details About Your Business or Connections to Any Business  Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)
Case number  City State ZIP Code  Tt 11: Give Details About Your Business or Connections to Any Business  Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)
Case number  City State ZIP Code  Total Title Give Details About Your Business or Connections to Any Business  C. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)
Case number  City State ZIP Code  Tt 11: Give Details About Your Business or Connections to Any Business  Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)
City State ZIP Code  rt 11: Give Details About Your Business or Connections to Any Business  7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)
The state of the following connections to Any Business  To Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)
7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
A member of a limited liability company (LLC) or limited liability partnership (LLP)
A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation
☐ No. None of the above applies. Go to Part 12.
Yes. Check all that apply above and fill in the details below for each business.
Theatrum Mundi LLC  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.
Theatrum Mundi LLC  Name  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN.  EIN: 9 2 - 3 6 0 5 1 8 3
Theatrum Mundi LLC  Name  Do not include Social Security number or ITIN.  Web design & development
Theatrum Mundi LLC  Name  Web design & development  EIN: 9 2 - 3 6 0 5 1 8 3

Doc 1 Filed 10/08/24 Entered 10/08/24 23:21:11 Desc Main Case 8:24-bk-12561 Document Page 56 of 68 Debtor 1 Anna Marie **Jennings** Case number (if known) \_ First Name Middle Name Last Name 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. **√**No Yes. Fill in the details below. Date issued MM / DD / YYYY Name Number Street ZIP Code State City Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Anna Marie Jennings, Debtor 1 Date 10/04/2024 Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? **✓** No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? **✓** No Attach the Bankruptcy Petition Preparer's Notice,

Yes. Name of person —

Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:					
Debtor 1	Anna	Marie	Jennings		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankr	ruptcy Court for the:	Cer	ntral District of California	<u> </u>	
Case number (if known)					

### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures Did you claim the property as a debt? Did you claim the property as exempt on Schedule C?

	Case 8:24-bk	:-12561 Doo	: 1 Filed 10/08 Document	3/24 Entero Page 58 o	ed 10/08/24 23:21:11 of 68	Desc Main
otor 1	Anna	Marie	Jennings		_ Case number (if kn	own)
et 2: Lie	First Name t Your Unexpired	Middle Name	Last Name			
any unex	pired personal prop	erty lease that you la estate leases. Une	listed in <i>Schedule G: E</i>	es that are still in	cts and Unexpired Leases (Office effect; the lease period has not	
Describe	your unexpired pers	sonal property lease	9S			Will the lease be assumed?
Lessor's na	ame:					☐ No
Description property:	n of leased					☐ Yes
Lessor's na	ame:					☐ No
Description property:	n of leased					☐ Yes
Lessor's na	ame:					☐ No
Description property:	n of leased					☐ Yes
Lessor's na	ame:					☐ No
Description property:	n of leased					☐ Yes
Lessor's na	ame:					☐ No
Description property:	n of leased					☐ Yes
Lessor's na	ame:					☐ No
Description property:	n of leased					☐ Yes
Lessor's na	ame:					☐ No
Description property:	n of leased					☐ Yes
rt 3: Sig	n Below					
	alty of perjury, I decl at is subject to an u		ated my intention abou	ıt any property of	f my estate that secures a debt a	and any personal

Signature of Debtor 1

Date 10/04/2024 MM/ DD/ YYYY

ГШ	in this information t	o identify your case:			- U	68	Form 122A-1	Supp:	o loitii ana in
De	ebtor 1	Anna	Marie	Jennings	i		г <b>б</b>		
		First Name	Middle Name	Last Name		'		s no presumption of abu	
De	ebtor 2							culation to determine if	
	pouse, if filing)	First Name	Middle Name	Last Name		'		ipplies will be made und st Calculation (Official F	
l le	nitad Statos Bankru	ntov Court for the	Cer	ntral District o	of California			ans Test does not apply	,
	nited States Bankru	picy Court for the.		itiai District	or Gamorina	-		d military service but it o	
	ase number known)								
(11	Kilowily						☐ Check if the	his is an amended filing	
Դք։	ficial Form	122 N <sub>-</sub> 1							
JI	ilciai i Oiiii	1227-1							
Ch	napter 7 S	Statement	of Your	Curren	t Monthly I	nco	me		12/19
								ing accurate. If more s	nace is needed
								any additional pages,	
ınd	case number (if kn	own). If you believe	that you are exer	npted from a p	resumption of abuse	because	you do not h	ave primarily consume	r debts or
	use of qualifying n this form.	nilitary service, com	plete and file <i>Sta</i>	tement of Exe	mption from Presump	tion of A	\buse Under §	707(b)(2) (Official Forn	n 122A-1Supp)
Pai	rt 1: Calculate	Your Current Mor	ithly Income						
1.	, .	tal and filing status?	•						
		Il out Column A, lines							
		ur spouse is filing w							
	☐ Married and yo	our spouse is NOT fil	ing with you. Yo	u and your spo	ouse are:				
	_		_		Fill out both Column A				
	Living sepa	arately or are legally	separated. Fill o	ut Column A, I	ines 2-11; do not fill ou	t Columi	n B. By checkir	ng this box, you declare	
					eparated under nonba the Means Test requir			es or that you and your	
	·	<u> </u>		, and the second				. , , , ,	
								ile this bankruptcy cas he amount of your mont	
								ny income amount more	
ex	ample, if both spou							ve nothing to report for	
\$0	) in the space.								
							mn A	Column B	
						Debt	or 1	Debtor 2 or non-filing spouse	
2	Vour gross wages	s, salary, tips, bonuse	es overtime and	commissions	(hefore all payroll			g epouloc	
۷.	deductions).	s, salary, tips, borius	es, overtime, and	COMMISSIONS	(before all payroll		\$311.57		
3.	Alimony and main	ntenance payments.	Do not include pa	avments from a	spouse if Column B				
٠.	is filled in.	nonance payment.	20oo.dao po	.,	opouco ii ociuiiii 2		\$0.00		
4.	All amounts from	any source which ar	e regularly paid	for household	expenses of you or				
		including child supp							
		members of your ho le regular contribution							
		nts you listed on line		o, oo.a	2 10 1101 111100 1111 20		\$0.00		
5.	Net income from o	operating a business	s, profession,	Dahtar 4	Dahtar 2				
	or farm			Debtor 1	Debtor 2				
	Gross receipts (be	fore all deductions)		\$157.51					
	Ordinary and nece	ssary operating expe	enses	- \$0.00	-				
				¢457.54	Сору				
	Net monthly incom	ne from a business, p	rofession, or farm	\$157.51	here		\$157.51		
					$\rightarrow$		ψ137.31		
6.	Net income from r	ental and other real	property	Debtor 1	Debtor 2				
	Gross receipts (be	fore all deductions)		\$0.00					
	Ordinary and nece	ssary operating expe	enses	- \$0.00					
				\$0.00	Сору				
	Net monthly incom	ne from rental or othe	r real property	Ψ0.00	here		\$0.00		
7	Interest P. 11.				,		\$0.00		
1.	Interest dividends	s and rovalties					จบ.บบ		

De

First Name Middle Name		Column A Debtor 1	Column B Debtor 2 or	
8. Unemployment compensation		\$0.00	non-filing spouse	
Do not enter the amount if you contend that the amounder	unt received was a benefit			•
the Social Security Act. Instead, list it here:				
For you	<b>V</b>			
For your spouse				
9. Pension or retirement income. Do not include any a benefit under the Social Security Act. Also, except a do not include any compensation, pension, pay, ann United States Government in connection with a disa disability, or death of a member of the uniformed seretired pay paid under chapter 61 of title 10, then include that it does not exceed the amount of retired pay to entitled if retired under any provision of title 10 other	s stated in the next sentence, uity, or allowance paid by the bility, combat-related injury or vices. If you received any ude that pay only to the extent which you would otherwise be	\$0.00		
10. Income from all other sources not listed above. S Do not include any benefits received under the Soc received as a victim of a war crime, a crime agains domestic terrorism; or compensation, pension, pay the United States Government in connection with a injury or disability, or death of a member of the unif list other sources on a separate page and put the to	al Security Act; payments humanity, or international or annuity, or allowance paid by disability, combat-related irmed services. If necessary,			
Total amounts from separate pages, if any.		+	+	•
	Proceedings of AG for	\$469.08		= \$469.08
Calculate your total current monthly income. Add each column. Then add the total for Column A to the total for Column A to the column A t	- C	<u> </u>	T	Total current monthly income
rt 2: Determine Whether the Means Test Appl	es to You			
Calculate your current monthly income for the year. Fol	ow these steps:			
12a. Copy your total current monthly income from line 11			Copy line 11 here $\rightarrow$	\$469.08
Multiply by 12 (the number of months in a year).				<b>x</b> 12
12b. The result is your annual income for this part of the	form.		12b.	\$5,628.96
Calculate the median family income that applies to you.	Follow these steps:			
Fill in the state in which you live.	lifornia			
Fill in the number of people in your household.				
Fill in the median family income for your state and size of To find a list of applicable median income amounts, go or			13.	\$74,819.00

14. How do the lines compare?

13.

14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*Go to Part 3. Do NOT fill out or file Official Form 122A-2.

instructions for this form. This list may also be available at the bankruptcy clerk's office.

14b. Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.

Filed 10/08/24 Jennings Document Pa Entered 10/08/24 23:21:11 Doc 1 Debtor 1

Middle Name

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Desc Main

Part 3: Sign Below

By signing here, I defclare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Signature of Debtor

Date 10/04/2024 MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Filed 10/08/24 Entered 10/08/24 23:21:11 Desc Main Doc 1 Case number (if known).

Middle Name

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### **Current Monthly Income Details for the Debtor(s)**

**Debtor 1 Income Details:** Income for the Period 04/01/2024 to 10/01/2024.

**Employment Income** 

Source of Income: Total Wine & More

Income by Month:

	Date	Income	Deductions	Net
6 Months ago	04/2024	\$0.00	\$0.00	\$0.00
5 Months ago	05/2024	\$0.00	\$0.00	\$0.00
4 Months ago	06/2024	\$0.00	\$0.00	\$0.00
3 Months ago	07/2024	\$0.00	\$0.00	\$0.00
2 Months ago	08/2024	\$0.00	\$0.00	\$0.00
Last Month	09/2024	\$1,377.44	\$149.28	\$1,228.16
	Average per month:	\$229.57	\$24.88	\$204.69

**Employment Income** 

Source of Income: County of Orange

Income by Month:

	Date	Income	Deductions	Net
6 Months ago	04/2024	\$0.00	\$0.00	\$0.00
5 Months ago	05/2024	\$0.00	\$0.00	\$0.00
4 Months ago	06/2024	\$0.00	\$0.00	\$0.00
3 Months ago	07/2024	\$0.00	\$0.00	\$0.00
2 Months ago	08/2024	\$0.00	\$0.00	\$0.00
Last Month	09/2024	\$492.00	\$44.03	\$447.97
	Average per month:	\$82.00	\$7.34	\$74.66

**Business Income** 

Source of Income: InstaCart

Income by Month:

	Date	Income	Expenses	Net	
6 Months ago	04/2024	\$0.00	\$0.00	\$0.00	
5 Months ago	05/2024	\$0.00	\$0.00	\$0.00	
4 Months ago	06/2024	\$184.13	\$0.00	\$184.13	
3 Months ago	07/2024	\$760.94	\$0.00	\$760.94	
2 Months ago	08/2024	\$0.00	\$0.00	\$0.00	
Last Month	09/2024	\$0.00	\$0.00	\$0.00	
	Average per month:	\$157.51	\$0.00	\$157.51	

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Central District of California

In re	,	Jennings, Anna	Marie						
						Case No.			
Debt	or					Chapter	7		
			DISCLOSURI	E OF COMPEN	SATION OF	ATTORNEY I	FOR DEBTO	OR	
1.	cor	mpensation paid	- ', '	ar before the filing	of the petition in	bankruptcy, or a	greed to be pa	named debtor(s) and the aid to me, for services reas as follows:	
	For	r legal services,	I have agreed to acc	ept				\$1,200.00	
	Prid	or to the filing of	f this statement I have	e received			<u> </u>	\$1,200.00	
	Bal	lance Due						\$0.00	
2.	The	e source of the	compensation paid to	me was:					
	<b>V</b>	Debtor	Other (specif	y)					
3.	The	e source of com	pensation to be paid	to me is:					
	<b>\( \sqrt{1} \)</b>	Debtor	Other (specif	y)					
4.		I have not agro	eed to share the abov	ve-disclosed compe	ensation with any	y other person u	nless they are	members and associa	tes of my
		_	to share the above-d	•		-		ot members or associa	tes of my
5.	In r	return for the ab	ove-disclosed fee, I h	nave agreed to rend	der legal service	for all aspects of	of the bankrupt	cy case, including:	
	a.	Analysis of th bankruptcy;	ne debtor' s financial s	situation, and rende	ering advice to th	ne debtor in dete	rmining wheth	er to file a petition in	
	b.	Preparation a	and filing of any petition	on, schedules, state	ements of affairs	and plan which	may be requir	red;	
	C.	Representation	on of the debtor at the	e meeting of credito	ors and confirma	tion hearing, an	d any adjourne	ed hearings thereof;	
6.	Ву	agreement with	the debtor(s), the ab	oove-disclosed fee	does not include	the following se	ervices:		

## Case 8:24-bk-12561 Doc 1 Filed 10/08/24 Entered 10/08/24 23:21:11 Desc Main Document Page 64 of 68

B2030 (Form 2030) (12/15)

### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

10/08/2024 /s/ Benjamin Heston

Date Benjamin Heston Signature of Attorney

Bar Number: 297798 Nexus Bankruptcy 3090 Bristol Street #400

> Costa Mesa, CA 92626 Phone: (949) 312-1377

Nexus Bankruptcy

Name of law firm

# STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

N	6	n	۵

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

#### None

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

### None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

#### None

Executed at Santa Ana	. California	A	
DANIA ANA	_, California	Anna Marie Jennings Signature of Debtor 1	
Date: 10/04/2024			
		Signature of Debtor 2	

I declare under penalty of periury that the foregoing is true and correct

# Case 8:24-bk-12561 Doc 1 Filed 10/08/24 Entered 10/08/24 23:21:11 Desc Main Document Page 66 of 68

1	
Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address	FOR COURT USE ONLY
Benjamin Heston	
Bar Number: 297798	
Nexus Bankruptcy	
3090 Bristol Street #400	
Costa Mesa, CA 92626	
Phone: (949) 312-1377 Email: ben@nexusbk.com	
Email: Botte Hoxasbilloom	
Debtor(s) appearing without attorney	
Attorney for Debtor(s)	
UNITED STATES BA	NKRUPTCY COURT
CENTRAL DISTRICT OF CA	ALIFORNIA - SANTA ANA DIVISION
la sec	CACE NO.
In re:	CASE NO.:
Anna Marie Jennings	CHAPTER: 7
	VERIFICATION OF MASTER
	MAILING LIST OF CREDITORS
	WAILING LIST OF CREDITORS
	FI DD 4007 4/ \}
	[LBR 1007-1(a)]
Debtor(s).	
Debtor(s).	
Debtor(s).	
	able certifies under penalty of periury that the master mailing list of
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applications are considered as a second control of the Debtor of the Debtor's attorney if applications are control of the Debtor of	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applications are considered as a second control of the Debtor of the Debtor's attorney if applications are control of the Debtor of	able, certifies under penalty of perjury that the master mailing list of complete, correct, and consistent with the Debtor's schedules and I/we
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicated its filed in this bankruptcy case, consisting of2 sheet(s) is	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicated its filed in this bankruptcy case, consisting of2 sheet(s) is	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicated its filed in this bankruptcy case, consisting of2 sheet(s) is	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicated in this bankruptcy case, consisting of2 sheet(s) is assume all responsibility for errors and omissions.  Date:10/04/2024	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicated in this bankruptcy case, consisting of2 sheet(s) is assume all responsibility for errors and omissions.  Date:10/04/2024	complete, correct, and consistent with the Debtor's schedules and I/we
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applic creditors filed in this bankruptcy case, consisting of sheet(s) is assume all responsibility for errors and omissions.  Date: Sign	complete, correct, and consistent with the Debtor's schedules and I/we ature of Debtor 1
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applic creditors filed in this bankruptcy case, consisting of sheet(s) is assume all responsibility for errors and omissions.  Date: Sign	complete, correct, and consistent with the Debtor's schedules and I/we
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applic creditors filed in this bankruptcy case, consisting of sheet(s) is assume all responsibility for errors and omissions.  Date: Sign	complete, correct, and consistent with the Debtor's schedules and I/we ature of Debtor 1
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applications filed in this bankruptcy case, consisting of2 sheet(s) is assume all responsibility for errors and omissions.  Date: Sign  Date: Sign  Date: Sign	complete, correct, and consistent with the Debtor's schedules and I/we ature of Debtor 1

### BARCLAYS BANK DELAWARE

PO BOX 8803 WILMINGTON, DE 19899-8803

### CHASE CARD SERVICES

PO BOX 15369 WILMINGTON, DE 19850-5369

### CITIBANK 5800 S CORPORATE PL

SIOUX FALLS, SD 57108-5027

### CITIBANK / BEST BUY

PO BOX 6497 SIOUX FALLS, SD 57117-6497

### CRUNCH

502 E 1ST ST TUSTIN, CA 92780-3347

### **DISCOVER BANK**

PO BOX 30939 SALT LAKE CITY, UT 84130

## GOLDMAN SACHS / APPLE CARD

LOCKBOX 6112 PO BOX 7247 PHILADELPHIA, PA 19170-0001

THIEADELITIA, TA 17170-0001

## MOHELA / DEPT OF EDUCATION

633 SPIRIT DR

CHESTERFIELD, MO 63005-1243

SYNCHRONY / PAYPAL CREDIT PO BOX 965005 ORLANDO, FL 32896

WELLS FARGO CARD SERVICES PO BOX 51193 LOS ANGELES, CA 90051-5493